Maryland Acts on Arthritis

Newsletter of the Maryland State Advisory Council on Arthritis & Related Diseases

July 2017 | Volume 3

Welcome! July is Juvenile Arthritis Awareness Month. About 1 child in every 1,000 develops some type of chronic arthritis. It is

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estimated that 300,000 children in the United States have been diagnosed with some form of juvenile arthritis. Great progress has been made in the treatment of juvenile arthritis, but there is still a great deal of work to be done. In this edition of our newsletter, you will find opportunities to participate in self-management arthritis programs for both children and adults. We welcome all contributions if there are programs taking place in your neighborhood.

Wishing you good health, Maryland State Advisory Council on Arthritis and Related Diseases Chair, Rebecca Manno MD, MHS Domenic Borro LNHA, PT Meg Gwaltney MBA Matthew Jackson Jody Marshall Erin Penniston MSW Julie Toms Poludniak MD, MPH, FAAFP Linnette Rivera LCPC, NCC, ACS Bernadette Siaton MD Chanel Whittaker PharmD, BCPS, CGP, **FASCP** Liz Woodward

Upcoming Events

July is Juvenile Arthritis Awareness Month (https://tinyurl.com/yaezo4fa)

Staff: Berit Dockter MPP, RD, LD

July 5-September 20, 2017. Tai Chi for Better Balance: Reisterstown,

MD; Contact: 410-887-1143

July 10-August 21, 2017, Stepping On Falls Prevention Workshop; Rosedale, MD: Contact: 410-887-0233

August 10-13, 2017 (Indianapolis) Juvenile Arthritis Conference (https://tinyurl.com/kcjkuz8)

September 11, 2017 and thereafter on Mondays 1pm-3:30, Living Well Workshop; Hagerstown, MD; Contact Dawn Reynolds: 301-790-8907

Arthritis Fast Facts

*Osteoarthritis (OA) is the most common form of arthritis, often presenting as stiffness, pain, and loss of range of motion. It is one of the most common causes of chronic disability in adults.

*There are a many risk factors for developing OA, including age, gender, obesity, occupation, previous injury, and sports activities. Genetics may also play a role in the risk of developing OA.

*The first lines of treatment for OA includes low impact exercise, physical therapy or aquatic therapy, and weight loss.

Living with Arthritis

Patient Story: Linda Kline

My name is Linda Kline. I am a Washington County Special Olympics Assistant Bocce Coach, a full time stay at home single mom, and full time Autism Advocate for my autistic son. I am a patient living with osteoarthritis of the spine, along with an arthritisrelated disease called fibromyalgia. I was first diagnosed with fibromyalgia when I was 26 years old



and osteoarthritis of the spine when I was 48. I wish to help raise awareness for the arthritis community. I have found pain relief in a portable TENS Unit along with diet changes, walking leisurely and wearing my back brace as instructed. Other items that have been beneficial in my pain management have been adding vitamins recommended by my physicians, adding aloe vera juice to my diet, and listening to my physicians on the prescription medications to take daily. I feel it is of the utmost importance to have a good physician support team in place for all types of arthritis. Some of the best advice I can provide to others with arthritis and related diseases is to attempt to stay as active and healthy as you possibly can. I realize that sometimes this is easier said than done, because I have days where I cannot move. However, I move around by staying active with my son's Special Olympic sports, attending family activities and events, and by mowing and gardening until the dreaded couch-bound day arrives. It is important to listen to your physicians as trial and error are sometimes the only ways to achieve success. So far I have been through physical therapy, aqua therapy, two rounds of bilateral sacroiliac joint injections, and two rounds of lumbar epidural spinal injections along with my pain management appointments and medications. While the various therapies and injections work for some, unfortunately these items have brought no relief for me. When I see my pain management physician for my follow-up, we go over everything and see what my physician would like for me to do next. Other advice I have is to followthrough. Whatever my pain management physician advises me to do, I will absolutely follow-through and complete. Sometimes I utilize my cane for walking. One of my physicians advised me not to rely on the cane because when you rely on the cane you end up using a walker and then a wheel chair way before you should. So in listening and following-through with what that physician stated-and other physicians I see have agreed with--I only utilize my cane when the absolute need is there so it doesn't become a habit that leads to my worsening decline. All of my physicians love my attitude because I just laugh. You know they say sometimes the best medicine in the world is laughter and my physicians are just wonderful because I get them to laugh with

September 17, 2017 at 8am, Get Ready! Get Set! Get Fit! 5K Run, 1 Mile Walk; CCBC Essex Campus; Baltimore, MD; Call: 410-887-2594 or visit www.getreadygetsetgetfit5K.com

September 24, 2017 AOII Strikes Out Arthritis, Oriole Park at Camden Yards; Baltimore, MD; Contact: Monica Grandorf 615-370-0920 or mgrandorff@alphaomicronpi.org

October 4, 2017 Walk Maryland Day (https://tinyurl.com/mrz92d4)

Tuesdays & Thursdays, Arthritis Foundation Exercise Program; Columbia, MD; Contact: 410-313-7213

Tuesdays & Thursdays, Exercise Essentials; Ellicott City, MD; Contact: 410-313-1400



For more events contact Maryland Area Agencies on Aging: https://tinyurl.com/hwcluep

Share Corner

Please share! A copy of this newsletter will be archived on the Maryland State Advisory Council on Arthritis and Related Diseases website (https://tinyurl.com/jb456ao). Please share the newsletter link on social media, in your hospital or organization newsletter, or print and post at your place of work or doctor's office waiting room. The Council requests your feedback on this newsletter, such as suggestions for topics. We welcome you to share with us any upcoming event or article. Email us your feedback and let us know if you have contacts who might benefit from receiving this newsletter: dhmh.chronicdiseaseinfo@maryland.gov.



me. My wish is to hopefully have the scientific and medical communities one day find a cure.

Those Aching Joints



Pain in your hips, knees, ankles, wrists, and fingers? If you're over age 60, you may have osteoarthritis (OA), the most common form of arthritis. OA affects the cartilage, or tissue, that covers the ends of the bones in a joint. When cartilage breaks down and wears away, the bones rub together and cause pain, swelling, and

loss of motion. Risk factors for OA include advancing age, being overweight, joint injury, and stresses on the joints. While there's no cure, there are several treatment options that can make a difference in your quality of life and ability to enjoy activities with less pain. Your primary care provider can map out a plan, which often includes physical therapy and judicious use of medications. A consistent physical therapy program of proper stretching, range of motion (ROM) techniques, and strengthening of surrounding musculature can reduce OA pain. Commonly used medications include glucosamine supplements (available over-the-counter), non-steroidal antiinflammatory medications (NSAIDS), and hyaluronic acid injections (Syn-Visc), which help lubricate stiff joint tissues. Additionally, consultation with a dietitian can help with weight loss, which may reduce pain. For advanced OA of the knee, hip, ankle, and shoulder, joint replacement may be considered. New techniques and devices require significantly shorter hospital stays and much quicker recovery times. Bottom line: Discuss your OA symptoms with your doctor and develop a strategy for success. Chris Brinton, MPT, CwCHP; Clinic Director, ATI Physical Therapy

Opportunity to Serve on New Council

Applications for the new State Advisory Council on Health and Wellness (https://tinyurl.com/yclaobc5) are being accepted now through August 1, 2017. The Council, which has an Arthritis Committee, includes 18 seats for members from the general public, including licensed healthcare providers, representatives of health insurers, representatives of the business sector as well as individuals with an interest in chronic disease, health and wellness, or physical fitness. The new Council takes effect October 1, 2017. Apply now: http://forms.dhmh.maryland.gov/

Department Name Change

As a result of recently adopted legislation, HB 180, the Maryland Dept. of Health and Mental Hygiene has become the Maryland Department of Health, effective July 1, 2017.

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